

Labour Advisory Board Election of Employee Representatives 2024

(Replacement of authorisation form)

Note: Please read the "Labour Advisory Board Election of Employee Representatives 2024 - Rules and Procedures" and the attached "Statement of Purpose for the Collection of Personal Data" before completing this form. Any person who knowingly or recklessly makes any false or incorrect statement or gives information which is materially false or misleading will result in disqualification of the appointment.

The completed replacement of authorisation form must be sent to the International Liaison Division, Labour Department, 15/F, Harbour Building, 38 Pier Road, Central, Hong Kong <u>by post, facsimile, electronic mail or by hand</u> (fax number: 2854 3435 / 3586 0830; email address: LAB2024@labour.gov.hk) <u>on or before 13 November 2024 (Wednesday)</u>. Please call 2852 4024 if confirmation from the Labour Department is not received by <u>15 November 2024</u>.

Part A: To be completed by the employee union

Replacement of authorised	<u>representat</u>	<u>tives</u>					
We,				,			
	(name of	employee	union)				
trade union registration number	:			, hereby apply to replace			
	an	d					
(name of FIRST authorised represe		(name	e of SEC	OND authorised representative)			
who have been appointed to Advisory Board Election ("LAB")	of Employee						
LAB/E2A/2024 / LAB/E2B/2024*, b		(name of F	IRST rei	placement representative)			
		•	-	,			
(name of SECOND replaceme	.nt rangaantati	(see Note	e i).			
We certify that the abovenamed r officer(s) / paid staff of our union. Th form.				et out in Part B and Part C of this			
	Doution los	. of the	-ffi	* please delete where inappropriate			
		Particulars of the officer (see Note ii) of the employee union who signs this form:					
	Name		:				
	Capacity		:				
	Contact	Tel No.	:	(Daytime)			
		Fax No.	:				
	Signature		:				
(Seal of the employee union)	Date		:				

Note i If only one authorised representative is to be replaced, only information of the authorised representative concerned and his / her replacement has to be filled in.

Note ii An officer of an employee union referred to in this form means any member of the executive of the employee union but not an auditor thereof.

Part B: To be completed by the <u>FIRST</u> replacement representative

Consent statement of the FIRST replacement representative

l,				
(name of representativ	e in Englisl	n)	(nai	me of representative in Chinese)
[Hong Kong Identity Card No			()	/ identification document
id-	entificatio	n no] (see Note iii),
hereby agree to be appointed a employee union named in this for I have read and agree to be be 2024 – Rules and Procedures". I in the "Statement of Purpose for the statement of Purpose for t	m in the l und by t agree to	_AB Election he <i>"LAB E</i> supply my	on of Empl Election of personal	oyee Representatives 2024. Employee Representatives data for the purposes stated
I declare that the particulars enter	ed in this	form are t	rue and ac	ccurate.
Sigr	ature		:	
	Name of replacement representative		:	
Con	tact	Tel No.	:	(Daytime)
		Fax No.	:	

Note iii Please provide either the Hong Kong Identity Card number or the name and number of another identification document for identification of your status as an authorised representative on the Election Day. Please note that a person who fails to produce identification document stated in the form or whose identification document carries information different from that submitted on the form will <u>not</u> be allowed to vote on the Election Day.

Part C: To be completed by the <u>SECOND</u> replacement representative

Consent statement of the SECOND replacement representative

I,						
(name of representative in English)			(nam	(name of representative in Chinese)		
[Hong Kong Identity Card N	0		()	/ identification document		
	identifica	tion no] (see Note iii),		
hereby agree to be appoin employee union named in the I have read and agree to 2024 – Rules and Procedur in the "Statement of Purpos	nis form in the be bound by es". I agree	e LAB Election the "LAB Entropy to supply my	on of Emplo Election of I personal d	yee Representatives 2024. Employee Representatives ata for the purposes stated		
I declare that the particulars	entered in th	nis form are t	rue and acc	curate.		
	Signature Name of re	•	:			
	representat Contact	Tel No.		(Daytime)		
		Fax No.	:			

Statement of Purpose for the Collection of Personal Data

Purpose of Collection

1. The personal data and other related information provided by means of Form LAB/E3/2024(R) ("the Form") will be used for purposes relating to the Labour Advisory Board ("LAB") Election of Employee Representatives 2024. The provision of personal data and other related information by means of the Form is voluntary. However, if you do not provide sufficient and accurate data, the Labour Department may not be able to process the replacement of authorised representative(s) to vote in the LAB Election of Employee Representatives 2024.

Classes of Transferees

2. The personal data and other related information provided by means of the Form may be transferred to other divisions of the Labour Department, other government departments / bureaux / organisations for the purposes mentioned in paragraph 1 above.

Access to Personal Data

3. You have a right to request access to and correction of the personal data and other related information as provided for in Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance (Chapter 486 of the Laws of Hong Kong). Your right of access includes the right to obtain a copy of your personal data provided by the Form.

Enquiries

4. Enquiries concerning the personal data collected by means of the Form, including the making of access and correction, should be addressed to:

Ms Edith Chan
Assistant Labour Officer
International Liaison Division
Labour Department
15/F, Harbour Building
38 Pier Road
Central, Hong Kong

Tel: 2852 4021